

EXHIBIT Q



TENNESSEE DEPARTMENT OF CORRECTION
Resignation Form

I WESLEY OLAN LANDERS am resigning my position as DEPUTY COMMISSIONER 2
(Print Full Name) (Job Title)
at DCCO
(Facility/District/Office)

My last day **AT WORK** will be MARCH 16th (MONDAY), 2020
(Day) (Date)

Effective date of separation cannot be extended by the use of leave

My reason for resignation is:

RETIREMENT

IF RETIREMENT: I want a **LUMP SUM** payment of my leave balances. WJ (Initial Choice)
I want to run out leave balances **TERMINAL LEAVE**.

I understand that I must return all State issued property no later than three days after my last day at work, to _____ (Designee). Failure to complete the TDOC exit process will result in a deduction of cost for State property from my payroll check.

Failure to provide a ten day notice of resignation may result in a separation not in good standing in compliance with Rules of Tennessee Department of Human Resources Chapter 1120-02-15(4) Resignations.

Badge, Uniforms, ID Cards, keys/key chits, security equipment, firearms state ID card, electronic equipment and all other State issued property must be returned within three (3) business days of separation. Failure to do so will result in the State of Tennessee seeking reimbursement for the cost of these items.

To assist in the continued improvement of our department, the Tennessee Department of Human Resources would like to offer you the opportunity to participate in the Statewide Exit Survey. As a separating employee, you are a valuable source of information regarding various working conditions you have observed and experienced during your employment with the Agency. The information you provide will help the Department of Human Resources (DOHR) identify possible reasons why employees choose to leave state employment. Participation in the survey is completely voluntary and anonymous.

If you wish to participate in the Statewide Exit Survey, please follow the link below.

<https://www.surveymonkey.com/r/823HKW9>

If you wish to participate in the Statewide Exit Survey, and are transferring to another Agency, please follow the link below.

<https://www.surveymonkey.com/r/PSMNB17>

Wesley Olan Landers
Employee Signature

3/16/20
Date

Louis Lark
Received by Name (Print)

[Signature]
Received by Signature

3/12/20
Date

SUPERVISOR WILL SUBMIT COMPLETED FORM TO THE HUMAN RESOURCES OFFICE.